

VII. HOME-DELIVERED MEALS FOR OLDER AND DISABLED ADULTS

Current Providers: _____

Funding Sources: _____

Total Funding Last Fiscal Year: _____

Number of Meals and/or Consumers Served Last Fiscal Year: _____

Cost per Meal (for each funding source): _____

A. EXISTENCE					
Are these services available to older and disabled adults in your community?					
1. Does your community have at least one home-delivered meals program?	Yes	No			
OVERALL EXISTENCE RATING	1	2	3	4	5

B. ADEQUACY	
Are these services in sufficient supply for those who need it?	
<p>1. Is there a waiting list for home-delivered meals? If so, how many people are waiting?</p> <p>Why is there a waiting list (ex. lack of funding, no provider)?</p> <p>(How many people are on the waiting list? How many currently receive service? What is the ratio of the number waiting ÷ the number receiving service? How does the ratio compare to state rates and similar counties? If there is not a waiting list, is it because everyone who qualifies receives services, because it is not agency policy to keep a waiting list, etc.?)</p>	<p>Yes No</p>
<p>2. If there is a waiting list, how acceptable is the average waiting time?</p> <p>(What is the average waiting time? How does this compare to state and similar county average waiting times? How many people did not need service anymore by the time they reached the top of the waiting list?)</p>	<p>1 2 3 4 5</p>
<p>3. To what extent are home-delivered meal routes established in all areas of your community? Please list any uncovered areas:</p> <p>(If there are uncovered areas, how many people are waiting in each area? How long have they been waiting for the development of a meal route? Why are the areas uncovered?)</p>	<p>1 2 3 4 5</p>
<p>4. To what extent can your community's home-delivered meals program(s) take into account any special nutritional needs for homebound people in your community?</p> <p>(Are nutritional assessments conducted? Are liquid nutritional supplements available? Are therapeutic diets available for diabetics? Are pureed diets available? What other special/therapeutic diet options are available? What % of consumers receive special nutritional assistance? What % of people seeking home-delivered meals decline or discontinue them because they do not meet the guidelines for the client's medically prescribed diet?)</p>	<p>1 2 3 4 5</p>
<p>5. To what extent can your community's home-delivered meals program(s) provide more than one meal per day for people at high-risk of malnutrition?</p>	<p>1 2 3 4 5</p>

(Under what circumstances can consumers receive more than one meal per day? What % of consumers receive more than one meal per day? What percent receive a liquid nutritional supplement in addition to their meal? What % of nutritionally at-risk consumers receive more than one meal per day? How do these percentages compare to state and similar county averages?)	
<p>6. To what extent do(es) your community's home-delivered meals program(s) refer people to additional food assistance programs such as food stamps, food pantries, and commodities programs, when possible?</p> <p>(How is it determined that a client needs additional assistance? What % of consumers are referred to other food assistance programs? Where were they referred? What % succeeded in getting additional assistance?)</p>	1 2 3 4 5
<p>7. How sufficient is funding to provide service to all older and disabled adults in your community who need it?</p> <p>(What funding sources pay for home delivered meals? Are there longer wait lists for some funding sources? Are there shorter lists/no lists for private pay consumers? Are there longer waits for therapeutic meals, if available? What is the per capita expenditure on home delivered meals in your community? How does this compare to the state average and similar counties?)</p>	1 2 3 4 5
OVERALL ADEQUACY RATING	1 2 3 4 5

C. ACCESSIBILITY

How obtainable are these services for those most in need?

1. To what extent are home-delivered meals available 7-days per week as needed? (What % of consumers receive meals 5 days a week? 7 days a week?)	1 2 3 4 5
2. To what extent are frozen or shelf-stable meals available when necessary (when a person is not on an established route, for emergencies, etc.)? (What % of consumers receive shelf stable meals instead of being on a hot meal route? What % of consumers receive hot meals, but have shelf stable meals for emergencies? How often are emergency meals given out? How many meals are given to each client at a time?)	1 2 3 4 5
3. To what extent can individuals with short term emergency needs, who are not currently consumers, be served quickly (e.g. someone who has surgery or breaks a leg and needs meals for a few weeks to a month, someone whose caregiver has been hospitalized or has a family emergency)? (If short-term consumers can be accommodated, how is this managed? Are they served before chronically ill consumers on the waiting list? Are a few service slots kept for short-term needs at all times? If so, is there a separate waiting list for short-term consumers?)	1 2 3 4 5
4. What arrangements are in place when home delivery is not possible due to inclement weather emergencies? (Are consumers and families notified that a meal will not be delivered; are they informed of agency policy upon enrollment? Are alternate plans established in advance that will be implemented when delivery is not possible?)	1 2 3 4 5
5. How adequate are the outreach programs conducted by home-delivered meals providers in your community? (What types of public information, outreach, and other informational programs are offered to the general public, caregivers, and others? What % of consumers are self referred?)	1 2 3 4 5
6. To what degree are public communications and outreach	1 2 3 4 5

activities consumer-friendly? (What is the average reading level of materials? Are materials available in languages other than English? Braille? In large-print?)	
7. To what degree do older and disabled adults know about home-delivered meals programs in your community? (What % of consumers are self referred or family referred? What % of calls from self referred consumers are appropriate for home delivered meal service?)	1 2 3 4 5
8. To what extent do key referral sources, such as doctors, nurses, hospital discharge planners, and home health agencies, know about home-delivered meals programs in your community? (What % of referrals are from key referral sources? What % of their referrals are appropriate?)	1 2 3 4 5
9. To what extent are home-delivered meals programs affordable to everyone who needs assistance? (What funding sources are accepted? What % of people are turned away each year because of an inability to pay? What is the per capita expenditure (for all your community) for home delivered meals?)	1 2 3 4 5
9. To what extent is funding available to consumers in need of financial assistance? (Are there any programs that offer subsidies for these services? How many slots/ How many providers?)	1 2 3 4 5
OVERALL ACCESSIBILITY RATING	1 2 3 4 5

D. EFFICIENCY AND DUPLICATION OF SERVICES

How reasonable are the costs of services?

Are options for streamlining services available in the community?

1. If there are multiple providers, to what extent are the costs of services comparable? (What are the ranges in meal costs? How do these charges compare to state and similar county costs /meal? Are there justified reasons for any large differences?)	1	2	3	4	5
2. How reasonable are the service costs in your community? (What are the ranges in meal costs? How do these charges compare to state and similar county costs /meal? Are there justified reasons for any large differences? How does the cost compare to that of a modest restaurant lunch in your community?)	1	2	3	4	5
3. How reasonable are the administrative costs of providing home-delivered meals services? (What % of the providers' total budget goes towards administrative expenses? How does this % compare to the state average and similar counties?)	1	2	3	4	5
4. If there are multiple providers, to what extent do they work together to serve consumers and accomplish projects? (Do home delivered meals providers have cooperative agreements with each other? How often do providers collaborate on projects? What types of projects?)	1	2	3	4	5
5. How adequate are the providers' screening and referral procedures? (If a client is not home-bound, do home-delivered meals providers make referrals to congregate meals and transportation to meal sites? If nutritional screening reveals dental problems or other needs, do they provide information or referrals to appropriate services?)	1	2	3	4	5
6. To what extent do the providers utilize cost-savings practices such as volunteer labor and/or donated spaces? (What percent of providers' budgets comes from these sources?)	1	2	3	4	5
7. To what extent do providers use budget-extending practices, such as fundraisers, foundation grants, memorial gifts, or client contributions to serve more consumers?	1	2	3	4	5

(What percent of providers' budgets comes from these sources?)	
OVERALL EFFICIENCY AND DUPLICATION RATING	1 2 3 4 5

E. Equity					
How available are these services to all who need them without bias?					
1. To what extent are home-delivered meals services available to all geographic areas in your community?	1	2	3	4	5
(Where are providers located? Are there any urban or large rural areas that are not served by a meal route? If yes, why? How is it determined to start a new meal route in an uncovered area?)					
2. To what degree are home-delivered meals services available to all populations in your community without bias?	1	2	3	4	5
(What are the demographic characteristics (%) of home delivered meals consumers [e.g. age, gender, race]? How do client's characteristics compare to the characteristics of the general older and disabled adult population in your community?)					
3. To what extent do home-delivered meals providers treat subsidized consumers the same as private pay consumers?	1	2	3	4	5
(Are there differences in services provided to subsidized vs. fee paying consumers with respect to delivery time, food, services, transportation, etc.?)					
4. If there is a waiting list, how sufficient is the system in place for prioritizing consumers in terms of need?	1	2	3	4	5
(What are the policies and procedures re. prioritization?)					
5. How sufficient are the home-delivered meals providers' nondiscrimination policies?	1	2	3	4	5
(What are the providers' nondiscrimination policies? Do they differ from state and federal laws? How are staff and consumers educated about the nondiscrimination policy?)					
OVERALL EQUITY RATING	1	2	3	4	5

F. Quality/Effectiveness How successful are these services in addressing consumers' needs?	
1. Do the food preparation kitchens and any other food handling areas have the required permits from the NC Department of Environmental Health? (What are the providers' ratings? Have there been any violations? If so, how have they been rectified?)	Yes No
2. To what extent do the home-delivered meals programs have special quality assessment or improvement efforts underway? (What process, QA or outcome evaluations have been performed for their service during the past 5 years?)	1 2 3 4 5
3. To what extent does an advisory committee(s) guide the operations of the home-delivered meals programs? (Who is on the advisory committee? Are family members of consumers represented? How often do they meet? What are their responsibilities?)	1 2 3 4 5
4. Do any funders regularly monitor the home-delivered meal services? (Who monitors home delivered meals? Have any problems been detected? If so, have the issues been sufficiently addressed?)	Yes No
5. How consistently do providers/volunteers meet the health guidelines for temperatures of either hot or cold food? (Does the last client on a rural route sometimes get hot food that is too cool or cold food that is too hot? What technology does the provider use to prevent this? Are volunteers consistent in measuring temperatures? Have monitoring visits uncovered any problems with food temperatures in the past 5 years? If so, how were the problems rectified?)	1 2 3 4 5
6. To what extent do the home-delivered meal providers survey consumers and their families to determine satisfaction with services and to solicit menu suggestions? (What kinds of client surveys have been conducted in the past 5 years? What processes were used? What were the major findings?)	1 2 3 4 5
7. To what extent do the providers act on consumers'	1 2 3 4 5

<p>feedback?</p> <p>(What policy or program changes have been implemented as a direct result of client feedback in the past 5 years?)</p>	
<p>8. How sufficient is the complaint resolution process?</p> <p>(What is the official complaint resolution process? How many complaints were documented last year? What was the nature of the complaints? What % were resolved?)</p>	1 2 3 4 5
<p>9. To what extent are complaints considered during planning, program development, or quality improvement efforts?</p> <p>(What policy or program changes have been implemented as a result of complaints?)</p>	1 2 3 4 5
<p>10.How well are volunteers trained?</p> <p>(Is training offered for new volunteers? Is it mandatory? What does the training program consist of? Is there ongoing training for volunteers? How many hours per year? Is it mandatory? What topics are covered?)</p>	1 2 3 4 5
<p>11.To what extent can the home-delivered meals programs accommodate the needs of all consumers and/or families requesting services?</p> <p>(Are consumers requesting services that are not provided? What are the number of slots compared to the target population? How does this compare to the state average and similar counties?)</p>	1 2 3 4 5
<p>12.How sufficient are the ancillary services offered by home-delivered meals providers (eg. assistance opening cartons or beverages) for those that need additional assistance?</p> <p>(What types of ancillary services are provided by home delivered meals providers? Are there any that should be added? What do consumers request?)</p>	1 2 3 4 5
<p>13.To what extent do case managers follow-up with consumers when volunteers report uneaten meals or unsafe living conditions?</p> <p>(Are volunteers trained to identify problem areas? If so, what does the training program consist of? What procedures do the providers employ to spot problems? What types of problems have been reported and have they been handled?)</p>	1 2 3 4 5
<p>14.To what degree do home-delivered meals honor cultural</p>	1 2 3 4 5

differences? (Are special meals available for vegetarians, people with religious restrictions, etc? What % of consumers request and receive special meals?)	
15.To what degree do home-delivered meals providers offer nutritional screening, counseling, or education if needed?	1 2 3 4 5
16.To what extent do home-delivered meals providers regularly communicate unmet needs to county commissioners, planning bodies, and other agencies? (Are providers represented in meetings with county commissioners, planning boards, and other planning bodies?)	1 2 3 4 5
17.How successful is your program in ensuring adequate volunteer coverage? (How often do providers have trouble obtaining someone to deliver meals? How many volunteers do providers have per route? How often do volunteers work on a route? Are there volunteers who serve as "back up" for regular route drivers?)	1 2 3 4 5
OVERALL QUALITY/EFFECTIVENESS RATING	1 2 3 4 5

Recap of Overall Home-Delivered Meals Ratings					
Existence	1	2	3	4	5
Adequacy	1	2	3	4	5
Accessibility	1	2	3	4	5
Efficiency and Duplication	1	2	3	4	5
Equity	1	2	3	4	5
Quality/ Effectiveness	1	2	3	4	5

Home-Delivered Meals' Major Strengths:

Identified Barriers and Areas for Improvement: